

## Post Op Instructions: Total Shoulder Replacement

Dr. Jonathan A. Godin, MD, MBA

- You will be seen by Howard Head PT at 7:30am the day after your surgery
- First Post Op Appointment:** \_\_\_\_\_ at \_\_\_\_\_ at The Steadman Clinic
- Please make an appointment with a physical therapist of your choice ASAP, preferably starting the day after surgery. We recommend PT 2-3x/week for 6 weeks after surgery.
- Please make a follow up appointment with an orthopedic physician in your home state, 10-14 days after your procedure.

*If you have any questions, please read this information in its entirety, and then call with any questions.*

### MEDICATIONS PRESCRIBED FOR AFTER SURGERY:

**Pharmacy Location where your medications have been ePrescribed: Please Pick Up ASAP**

- Vail Health Pharmacy: 181 W Meadow Drive, Vail, CO 81657 970-479-7253
- Edwards Medical Center Pharmacy: 322 Beard Creek Rd, Edwards, CO 81632 970-569-7676
- Other: \_\_\_\_\_

### **FOR PAIN RELIEF (Narcotics):**

- You have been provided pain medication after your surgery, please take as directed. Wean off of narcotics as soon as symptoms allow. Take with food. Notify office if nausea, vomiting, headaches, or rash occurs. Other side effects include; drowsiness and constipation.
- **Use caution when taking TYLENOL** or other acetaminophen products while taking Percocet, Norco, or Lorcet as these medications already contain acetaminophen. Do NOT exceed more than 3000mg of Tylenol per day.
- **We do NOT recommend ibuprofen, Advil, Aleve, Motrin, or NSAID products for 6wks after surgery**, as these can delay healing.
- It is very common for your intestinal system to slow down after surgery because of the anesthesia and narcotic use. Please try over-the-counter stool softeners and laxatives, such as Miralax, Senna, or Docusate as a first step in treatment. If you do not have a bowel movement 3 days after surgery, please call the office and we will consider another option.
- You should not drive while taking pain medications as they delay your responses.
- Narcotics are addictive and have a high abuse and overdose potential. It is extremely important to take these as directed and not to mix with alcohol or other forms of medication unless approved by the medical team. Please keep all prescribed narcotics LOCKED and away from children. Lastly, please properly dispose of leftover narcotics. Contact your local police department for more info.
  - **OXYCODONE 5 mg**: this is a short-acting medication for pain. You should take 1 or 2 tablets every 4 to 6 hours AS NEEDED. If you are not in pain, you should not take this medication. Try to wean down your use of this drug as soon as symptoms allow. *If 2 tablets every 4 hours are not relieving all your pain please call our office or the MD on Call.*
  - **LORCET 5mg**: (**hydrocodone 5mg and acetaminophen 325mg**) this is a short-acting medication for pain. You should take 1 or 2 tablets every 4 to 6 hours AS NEEDED. *If 2 tablets every 4 hours are not relieving all your pain please call our office.* THIS MEDICATION CONTAINS TYLENOL (each tablet= 325mg of Tylenol). Use caution when taking additional Tylenol. MAX TYLENOL DOSE PER DAY IS 3000mg.
  - **DILAUDID 2mg**: this is a short-acting medication for pain. You should take 1 or 2 tablets every 4 to 6 hours AS NEEDED for pain. *If 2 tablets every 4 hours are not relieving all your pain please call our office or the MD on Call.*
  - **PERCOCET 5mg/325mg**: this is a short acting pain medication that contains 5mg of oxycodone and 325mg of acetaminophen (Tylenol). You should take 1 or 2 tablets every 4 to 6 hours as needed for pain. *If 2 tablets every 4 hours are not relieving all your pain please call our office or the MD on Call.* THIS MEDICATION CONTAINS TYLENOL (each tablet= 325mg of Tylenol). Use caution when taking additional Tylenol. MAX TYLENOL DOSE PER DAY IS 3000mg.
  - **TRAMADOL 50mg**: This is a short acting medicine for pain that is still considered a narcotic, but is less potent. Take 1-2 tablets every 6 hours as needed for pain.
  - **OTHER:** \_\_\_\_\_

### **FOR NAUSEA:**

- **ZOFRAN (Odanteron) 4mg Tablet** - this medication is for nausea or vomiting. Place 1 tablet under the tongue every 8 hours as needed for nausea. If you are not nauseous, you do not need to take this medication. Please call our office if you still experience nausea despite taking this medication.

### FOR ANTI-COAGULATION (Blood Thinners):

You have been prescribed an anticoagulation medication, to be taken for 4-6 weeks after surgery. This medication is taken to prevent a blood clot from developing in your leg, which is a possible complication after any surgery. This medication is required after all surgeries. You must finish the entire prescription of anticoagulation medication, no matter what type of procedure you had. In addition to the medication, please wear the white stockings on your lower legs for 2 weeks after surgery, as these help prevent a blood clot. The stockings may be washed.

- **ASPIRIN 325 mg:** This is a mild blood thinner. Please take 1 tablet every day for 4-6 weeks: starting the day after surgery, no matter what kind of procedure you had. Finish the entire prescription bottle, even if you are feeling better.
- **ELIQUIS 2.5mg:** This is an oral medication to prevent blood clots in patients with a higher risk of blood clots, such as those flying for more than 3 hours after surgery, those with a personal or family history of clots, or those with a history of cancer or on certain types of medications. Usually this medicine is taken 2x per day for 4-6 weeks. Do not take aspirin while taking this medication.
  - Take Eliquis on the day before, the day of, and the day after your flight. Do not take aspirin on the days you take Eliquis, but resume the aspirin as prescribed after you finish the course of this medication.
- **LOVENOX 40mg injection:** This is a daily injection. Inject 40mg subcutaneously daily or the day before travelling. Do not take aspirin while taking this medication.
- **OTHER:** \_\_\_\_\_

### OTHER MEDICATIONS TO CONSIDER:

- **TYLENOL:** You can buy this Over The Counter. Some pain medications contain **Tylenol**, including Norco, Lorcet, and Percocet. Oxycodone and Dilaudid **DO NOT** contain **Tylenol**, and it is recommended to *add in Tylenol for additional pain control if needed*. This can be taken as 325-600mg every 4 hours. The maximum dose for Tylenol per day is 3000mg.
- **MIRALAX, COLACE, SENNA OR DOCUSATE:** These are over-the-counter mild laxatives and stool softeners for prevention of constipation. We suggest beginning these the day after surgery if you are taking narcotics. Please call the office if you have not had a bowel movement for three days after your surgery.
- **BENADRYL:** Itching can be common when taking narcotics. Take this as needed for any itching symptoms. Can be found over-the-counter.

### ANTIBIOTICS:

After a joint replacement, you may need to take antibiotics prior to certain medical procedures in the future to prevent infection. Please contact your primary care provider or our office:

- before going to a dentist for anything besides a routine cleaning or filling,
- before having bladder or colon procedures (such as colonoscopy or cystoscopy),
- before surgeries that let bacteria into your blood stream, such as bowel or urinary tract procedures,
- if you get a bacterial infection on your skin, or pneumonia

You may only need one preventative dose of antibiotic just prior to a procedure to be effective.

### DRESSING/BANDAGE CHANGES:

You may change your surgical dressing the next day after surgery, or if you are seeing a physical therapist, you may have them do this for you. Please read these directions in their entirety before beginning a dressing change.

- Take down/remove all the bandages besides the Steri-Strips (white tape on your skin)
  - For Shoulder Surgery, you may carefully remove any tan foam tape, large white pads, 4x4 gauze pieces, OpSites (clear water proof bandages), or yellow pieces of linen (called Xeroform).
- It is very important that you leave the last layer of bandage on your skin; this layer is made of “Steri-Strips”, which are the white pieces of tape adhered directly to your skin. These should stay on until your first post-operative appointment with The Steadman Clinic.
  - You may GENTLY clean around the Steri-Strips with a warm washcloth and Dial antibacterial soap to remove any dried blood, or iodine solution used to clean your operative area prior to surgery. Do NOT scrub the incision area.
  - Do NOT put any oil, Neosporin, hydrogen peroxide, or lotion on your incision.
  - Do NOT submerge your incision in any bath or hot tub.
- After you have cleaned the incision area, you may re-cover the incisions (with the Steri-Strips still in place) with an OpSite Bandage that was given to you in post-op. Several sizes of OpSites have been provided, choose the best one that fits your needs. To place the OpSite, peel the paper off of one side to reveal the sticky tape, then place this over your incision. Then you may remove the top layer of paper from the OpSite to reveal the clear tape adhered to your skin.
  - You may shower with these OpSites covering your incision. Once the OpSite appears wrinkled, dirty, or old, you may peel it off and replace it with another one. We recommend changing the OpSite every 1-3 days.
  - To shower, we recommend sitting down, or getting a metal/plastic fold out chair to place in your shower (available at WalMart for <\$15. We also recommend getting a non-slip mat for your bath tub). Before you turn the water on, sit down on the chair in the shower, remove any brace that you are required to wear (as they are not water proof), and

while safely seated, allow the water to roll over your operative area, protected by the OpSites. Once you have finished bathing, pat the incision area dry, replace the OpSites as needed, and then put your brace back on.

- You may notice suture/stitches on your incision, these may be black or they may be clear, like fishing line. These will be removed by The Steadman Clinic at your first post-op appointment, or if you are following up elsewhere, they may be removed by your physical therapist or another physician 10-14 days after surgery.
- Some signs to look for that may be of concern are an incision that is very red and very painful, leaking thick yellow or cloudy fluid, is still bleeding, or smells foul. Any of these symptoms with a high fever is reason to call our office.
  - Small amounts of clear fluid or dried blood is normal, as is bruising and discoloration.
- **If you were given a NERVE BLOCK or catheter** pre operatively and you have any issues with it, including leakage, pump malfunctioning, catheter tip falling out, etc, then please call the phone number provided on your pump or ask to speak with pain services or an on call MD (contacts below).

### **OTHER GENERAL SURGERY INFORMATION**

**ICE:** Swelling and bruising is normal after surgery because fluids are used during surgery. Continuous icing will help to decrease swelling and pain. It is best to **ice at least 5-6 times a day for 20-30 minutes**. It is very important to always have a protective cloth layer between the ice and your skin. You may use ice bags, frozen wraps, frozen peas or a NICE or Game Ready unit (an ice/compression machine). If you have received a NICE machine and have any questions regarding its use, please call the number provided with the machine.

**DRIVING:** Please **do not drive** until you are evaluated in the office after surgery. You are considered an impaired driver following surgery, and if you choose to drive, your insurance may not cover any accidents that occur.

**PHYSICAL THERAPY:** This is dependent on your injury and specific procedure. You will be given specific protocol after your surgery (included in the white surgery folder). Please begin therapy at a facility of your choice as soon as possible following surgery (within 2-3 days) and bring this folder with you to the visits.

**ACTIVITY RESTRICTIONS/BRACE/SLING:** **If you are placed in a sling, it is extremely important to use as directed and make sure you always have the brace on when ambulating (walking).** It is important that you follow all instructions regarding activity restrictions as they are intended to promote healing and prevent complications. You may take the brace/sling off if you need to change the bandages, change clothes, or shower (be extra cautious!), or if you are sitting. We recommend wearing the sling even when sleeping unless told otherwise by our team.

**SIGNS AND SYMPTOMS OF COMPLICATIONS:** Although complications are rare the following are a list of concerns you should be aware of:

- **Infection** – increased pain not relieved with medication, fever, chills, redness, swelling or drainage from incision.
- **Blood Clot** – swelling, tenderness, or calf pain to touch or when you move your ankle up and down, shortness of breath and chest pain.

#### **REASONS TO CALL:**

- Fever, chills or sweats
- Redness, swelling or warmth around the incisions, non-clear drainage from the incision or increased pain in or around the incision
- Calf swelling, redness, pain or warmth
- Chest pain, difficulty breathing, or cough
- Inability to have a bowel movement after 3 days
- Inability to urinate after 1 day

If any of these concerns occur after-hours, please call **970-476-1100** to speak to the on-call physician, or go to your local ER!

### **CONTACTS:**

**If you have any questions, please call:**

- **About your anesthesia catheter/block:** **970.471.5203** (Acute Pain Services)
- **About your surgery, post op recovery, medical issues, or PT:** **970.471.8620** (Michelle Lafontaine, PA to Dr. Godin) – you may text this number as well as call, although texting is faster response usually
- **About your post op appointments or scheduling/finance concerns:** **970.238.8093** (Melanie Petronio, Practice Coordinator)
- **Anytime you are unable to get ahold of our team and have an urgent matter, or anytime outside of the 9am-5pm hours or weekends:** **970.476.1100** (On-call MD)